Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

10,635,697

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TO	TAL CLAIMS	15						RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			) 5 minus 20=		* &			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 min	nus 3 =	* Ø			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	i	TOTAL		OR OR	TOTAL	751)
CLAIMS AS AMENDED - PART II								OTHER THAN				THAN
(Column 1)			(Colum		-	(Column 3)		SMALL ENTITY		OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=	]	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	1	X42=		OR	X84=	
لنا	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	CLAIM		1	+140=		OR	+280=	
							i	TOTAL	<u> </u>		TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDIT. FEE	<u> </u>		AUDII. PEE,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**		=	┧╽	X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF MI	Minus	***	F CL AIA4	=	┨╏	X42=		OR	X84=	
<u></u>	TINGTENESE	INTATION OF MI	OLITE DE	ENUCIN	CLANV		لـ	+140=		OR	+280=	
	TOTAL ADDIT, FEE									OR	TOTAL. ADDIT. FEE	
	(Column 1) (Column 2) (Column 3)											
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	╽╽	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		]=	┧╽	X42=		OR	X84=	<b></b>
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										ļ .	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR .	+280=	<u> </u>
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE ADDIT. FEE												